

My Planned Care Patient information Platform

Rheumatology

Introduction

We hope that this guide will explain about the COVID-19 protocols before your surgery and the My Planned Care patient information platform, that will help to support you leading up until your surgery. Please contact the team if you require further information via the details at the end of this letter.

My Planned Care patient information platform

The My Planned Care patient information platform provides you with information about how you can support yourself whilst you are waiting to attend the hospital for your treatment. Clinicians who are responsible for your care have written the guidance.

Our Rheumatology Service

Rheumatology is a medical speciality that cares for a wide range of conditions affecting the musculoskeletal system. It is used to describe painful conditions of the joints, muscles and surrounding soft tissues. We look after patients with Inflammatory Arthritis, Osteoarthritis and Connective tissue diseases such as Lupus, Systemic sclerosis or Vasculitis. We also see patients with soft tissue rheumatic complaints and fibromyalgia, although a lot of these conditions are now managed in GP practices. Many of the conditions treated are linked with the immune system attacking different body tissues. The Rheumatology Service is predominately outpatient based across three sites:

- The Princess Alexandra Hospital
- St Margaret Hospital
- Hearts and Essex Hospital

Services we provide include:

- Daily consultant or nurse specialist appointments
- Nurse-led blood monitoring
- Joint aspirations & injections
- Biologic & immunosuppressive infusion therapy
- Drug Education
- Fibromyalgia programme (run by physiotherapy - appointment arranged following referral)
- Soft tissue injections

We offer specialist advice to inpatients as well as GP's. However, we do not provide an out of hours service.



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Guidance for Patients

If your symptoms get worse this is known as a *'flare-up'*

A flare is unpredictable and may start suddenly. It can last for hours, days, or even months if not treated. A flare may result in:

- Increased swelling
- Worsening pain
- More joint stiffness
- Increased tiredness
- Feeling generally unwell or feverish
- Decreased appetite

Sometimes a flare may follow an infection, such as a chest or urinary infection. In this case it is advisable to consult your GP as you may require treatment for the infection. During a flare you may need to:

- Adjust some of your medication. Taking painkillers and/or anti-inflammatory tablets regularly should help control and minimise the pain. Never exceed the maximum recommended dose. You should continue to take all your other medication as normal. If you have active infection, you may need to withhold your Disease Modifying Drugs (you will have been advised of this during your initial drug education)
- If you are taking steroid tablets, it is important that you do not alter the dose without consulting your GP first.
- Anti-inflammatory gels may be applied locally to the affected joints following the manufacturer's . Instructions

There are other things you can do to help yourself which can soothe painful joints:

- Rest or exercise? During a flare it is important to pace your activities. This means planning the day, taking into consideration your increased tiredness. You may need to take short rests in between activities but remember to keep those joints moving. This reduces stiffness and maintains muscle tone. You may be reluctant to exercise flaring joints, but it will help.
- Wearing wrist splints may help reduce pain by keeping the joint in a neutral position. Try to avoid putting pressure through an inflamed joint.
- Relaxation, distraction or imagery may help. This may include listening to music or picturing
- Heat therapy includes wheat bags, a hot water bottle or electric heat pads (make sure these are wrapped in a towel so as not to burn yourself) and place on the painful joint or even having a warm bath or shower.
- Cold therapy includes wheat bags, bag of frozen peas, bag of ice cubes, gel pack or a bowl of water with ice cubes for hands or feet. Make sure these are wrapped in a towel before placing on your joint.



- Hot and cold treatments should be applied for up to 15 minute intervals, with the exception of iced water where 5 minutes is acceptable. Always ensure that the skin has warmed up before re-applying.

Further Help

NHS Choices: <http://www.nhs.uk/conditions>

Arthritis UK

Website: [Versus Arthritis](#)

Telephone: 0800 5200 520

NASS National Ankylosing Spondylitis Society

Website: [National Axial Spondyloarthritis Society](#)

Telephone: 020 8741 1515

NRAS (National Rheumatoid Arthritis Support)

Website: [National Rheumatoid Arthritis Support - HELP](#)

Telephone: 0800 298 7650

COVID-19

The COVID-19 pandemic has had a significant impact on the NHS and the ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will commence.

It is extremely important that you follow the self-isolation and COVID-19 test before your operation.

If you have recently tested positive for COVID-19, you have an increased risk of lung complications, or other serious complications, if you have an operation under general anaesthetic.

If you have tested positive for COVID-19 up to seven weeks before your operation, please contact your surgeon to discuss the risks and benefits.

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Upon discussion with your surgeon, you might be able to choose between general and local anaesthetic including eye-drop anaesthesia

After seven weeks, if your symptoms have gone, your risk will reduce to the same level as before you tested positive for COVID-19. However, if you still have COVID-19 symptoms, your risk will remain high.

The risk also depends on your age, overall health and the type of surgery that you are undergoing.



Guidance for Patients

Whilst you are waiting for your surgical intervention it is important that you remain as active and as medically fit as possible. If you have any long-standing conditions such as high blood pressure you should get this reviewed at your Doctor's surgery to make sure it remains well controlled. This will also help prevent any unnecessary delays when you come for your pre-operative assessment. Maintaining a well-balanced diet is also important, as is reducing any excessive weight that may be impacting on your general health. If you are a current smoker it would be advisable to seek support to help with stopping, advice can be found at your local pharmacy or Doctor's surgery.

You can access further information on Essex well-being service on the link below:

<https://www.essexwellbeingservice.co.uk/>

What should I do about my medication?

Make sure your team knows about all the medication you take and follow their advice. This includes all blood-thinning medication as well as herbal and complementary remedies, dietary supplements, and medical you can buy over the counter. If you take hormone replacement therapy (HRT), your surgeon may

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recommend that you stop taking it as it may increase the risk of the cancer coming back.

What can I do to help make the operation a success?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health. Regular exercise should help to prepare you for the operation, help you to recover and improve your longterm health. Before you start exercising, ask the breast cancer team of your GP for advice.

You can reduce your risk of infection in a surgical wound.

- In the week before the operation, do not shave or wax the areas where a cut is likely to be made.
- Try to have a bath or shower either the day before or on the day of the operation.
- Keep warm around the time of the operation. Let the breast cancer team know if you feel cold.
- If you are diabetic, keep your blood sugar levels under control around the time of your procedure.

What should I do if my health is deteriorating?

Urgent health advice

For urgent health advice about your physical or mental health, that is not an emergency, please call NHS 111 from any landline or mobile phone. You can also visit www.nhs.uk. The service is available 24 hours a day, seven days a week.



Life threatening emergencies

For life threatening emergencies, including severe bleeding, breathing difficulties or chest pains, please dial 999 immediately.

Contact your GP surgery

If you experience an increase in pain, a significant change in your symptoms or eyesight, contact your GP surgery in the first instance for a review and to seek advice.

GP surgeries remain open and may operate differently prior to COVID-19. GP practices continue to offer telephone, online and video consultations, and offer face-to-face appointments for patients who are a high clinical priority.

When you call or use an online form to contact your GP surgery to make an appointment, you will need to answer a series of questions to enable the team to guide you to the most appropriate clinical person to help with your condition.

This could be a nurse, clinical pharmacist, physician's associate, GP or paramedic.

You can view a list of GP practices with the relevant contact details via the website below:

[Find a GP - NHS \(www.nhs.uk\)](http://www.nhs.uk)

Contact details

If you have any further queries or concerns, please contact our team via the contact details below:

Appointments: 01279444455

Please note we will not give explicit clinical advice via telephone/email until you have been reviewed at a clinic by a consultant.

